PRINTED: 03/10/2017
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL068024	A. BUILDING: 01 B. WING	R 03/05/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRESCENT GREEN OF CARRBORO	624 JONES FERRY ROAD CARRBORO, NC 27510

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
{C 000}	Initial Comments Report of a Biennial Follow Up Construction Survey by Ed Miller, conducted on March 2, 2017. The following deficiencies cited during the previous Biennial Follow Up Construction Survey, have not been satisfactorily corrected and will require a new Plan of Correction.	{C 000}	The administrator or designee will assure that all mechanical systems are maintained and in working condition.	
{C 189}	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 5-Based on observation, this facility has not maintained all the mechanical systems in an operating condition. Findings on 09/02/2016: b) The kitchen range hood exhaust fan was not working.	{C 189}	The maintenance person will do a regular check of systems weekly. The staff has been instructed to make maintenance aware when systems are not working. The maintenance person will repair the systems or call a repair person. 3/15/17 The hood was repaired see copy of parts ordered and repairman's Invoice	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Deus. Coleman — TITLE: Administrator — (X6) DATE: 3/28/17

INVOICE

ELECTRIC SUPPLY DURHAM
3164 HILLSBOROUGH RD
DURHAM, NC 27705

ELECTRIC SUPPLY CO. OF
Branch: 300 DURHAM
714 WEST JOHNSON ST
RALEIGH, NC 27603
USA

919-828-3726

Bill To:
DURHAM CASH SALES ACCT

SALE

MID: 2810 Store: 4616 Term: 0201
REF#: 00000003
Batch #: 164 RRN: 706621608559
03/07/17 16:02:00
Trans ID: 587066757200835
APPR CODE: 150529
VISA Chip
**********2479 **/**

AMOUNT $91.81

APPROVED

VISA DEBIT
AID: A0000000031010
TVR: 80 80 00 80 00
TSI: 68 00

INVOICE
1007164538

Invoice Date	Page
3/7/2017 16:13:09	1 of 1

ORDER NUMBER
1289736

'o:
AM CASH SALES ACCT

Customer ID: 11289

CUSTOMER COPY

PO Number		Date	Disc Due Date	Discount Amount
ASSISTING LIVING	Net 30th prox	4/30/2017	4/30/2017	0.00

Order Date	Pick Ticket No	Primary Salesrep Name	Taker
3/7/2017 16:08:06	2284472	HOUSE ACCOUNTS-DURHAM	RRIGSBEE

Quantities					Item ID / Item Description	Pricing UOM / Unit Size	Unit Price	Extended Price
Ordered	Shipped	Remaining	UOM / Unit Size	Order				
1	1	0 EA			8910DPA34V02 SQD	EA	85.40000	85.40
			1.0		30A 4P 120V CONTACTOR	1.0000		
					07350			

Customer Note: ALL CASH SALES ARE FINAL!!
THANK YOU FOR YOUR BUSINESS!!

Carrier: **Tracking #:**

Total Lines: 1

SUB-TOTAL:	85.40
DURHAM NEW RATE 2.75%:	2.35
NORTH CAROLINA STATE TAX:	4.06
MC/VISA:	91.81
AMOUNT DUE:	**0.00**

WORK COMPLETED 03.15.2017 @ 11:52 AM

ORIGINAL

12.14.1332 - 01/30/14

Libscomb Electric

INVOICE

515 Dowd Street
Durham, NC 27703

INVOICE #275
3-15-2017

TO:
Crescent Green Of Carrboro
624 Jones Ferry Rd.
Carrboro, NC 27510

FOR:
Kitchen Hood
P.O.

DESCRIPTION	HOURS	RATE	AMOUN
REPLACE HOOD MODULE			250.00
CRESCENT GREEN PROVIDED THE PARTS			
		SUB TOTAL	250.00
PAID 250.00 CASH ON 3-15-2017			
		TOTAL	000.00

Make all checks payable to Company Name
Total due in 15 days. Overdue accounts subject to a service charge of 1% per month.

THANK YOU FOR YOUR BUSINESS!